

2009 KEYSTONE STATE INVITATIONAL MARTIAL ARTS CHAMPIONSHIPS

DATE: Saturday, April 18, 2009 **TIME:** Registration 9:00 A.M. Eliminations 11:00 A.M.
LOCATION: Southern Lehigh High School, Center Valley, PA

***EARLY REGISTRATION (BY APRIL 13th, 2009): \$45.00 One or Two Events, \$5.00 each additional event**
Send entry to Kim's Black Belt Academy, Inc., 1627 Sumner Avenue, Allentown, PA 18102

REGISTRATION AT THE DOOR: One or Two Events \$55.00 Per Event - Additional Event \$5.00

Name _____ Age _____ Sex _____ WT. _____ HT _____"

Address _____ City _____ State _____

School/Club Name _____ Phone _____

Address _____ City _____ State & Zip _____

Instructor's Name _____ Rank _____

I submit my application for the 2009 Keystone State Invitational Martial Arts Championship. I agree to waive claims against any persons, schools, or associations connected with the Invitational Championship for any injuries I may sustain. I will assume full responsibility for all my actions in connection with the Championship. I further agree that any pictures taken of me or by me in connection with the Championship can be used by the Tournament Director for publicity or promotion without compensation to me at this time or any other time.

Signature _____ **NO PERSONAL CHECKS ACCEPTED - NO REFUNDS**

**If less than 18 years of age: Parent/Guardian's Signature, _____

I WISH TO COMPETE IN THE FOLLOWING events (PLEASE CHECK):

BREAKING _____ WEAPONS _____ FORMS (Hyungs/Kata) _____ SPARRING _____

BREAKING

Name _____

Rank _____

School _____

Age _____ Weight _____

Placement: 1st 2nd 3rd 3rd

WEAPONS

Name _____

Rank _____

School _____

Age _____ Weight _____

Placement: 1st 2nd 3rd 3rd

SPARRING

Name _____

Rank _____

School _____

Age _____ Weight _____

Placement: 1st 2nd 3rd 3rd

FORMS

Name _____

Rank _____

School _____

Age _____ Weight _____

Placement: 1st 2nd 3rd 3rd